

EXHIBIT "3"

Noel S. Weiss MD, Dr.PH.  
18372 Ridgefield Rd NW  
Shoreline, WA 98177

To: Michael Vieira

From: Noel S. Weiss MD, Dr.PH.



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At your request, I am writing to comment on the report from the Centers for Disease Control, "Acute hepatitis and liver failure of unknown etiology in Hawaii – 2013: Report of a Cluster Investigation", as it pertains to the possible role of consumption of OxyELITE Pro in the etiology of liver failure in a number of Hawaii residents. As we have discussed, my fee for doing work on this matter (including preparation of this report) is \$500 per hour.

I believe that I am qualified to offer an informed opinion. I obtained an MD degree from Stanford University in 1967 and a DrPH degree (Epidemiology and Biostatistics) from the Harvard School of Public Health in 1971. Since 1973, I have been a faculty member in the Department of Epidemiology, School of Public Health, University of Washington. At the present time, I hold the rank of Professor. I have authored or coauthored over 600 articles on a variety of topics in medical journals, as well as several books. I served as Chair of the Department of Epidemiology for nine years, and for twenty-five years was Principal Investigator of a training grant in cancer epidemiology and biostatistics from the National Cancer Institute. During the course of my career, I have received numerous research grants from the National Institutes of Health. One of these was the Outstanding Investigator Award from the National Cancer Institute, which I received in 1985 and had renewed in 1992. My CV is attached.

Epidemiologic studies are an important source of information regarding the causes of illness in human beings. Such studies seek to determine whether the occurrence of one or more illnesses differs between persons who have or have not sustained a given exposure. If these studies are large enough, and can be designed and conducted in such a way as to minimize measurement error and other types of distortion, they can provide the most relevant information regarding the hazards resulting from a particular exposure in humans.

Potential causes of a disease "outbreak" in a geographic population often are investigated by means of case-control studies, in which persons with the illness in question and well persons in that population are compared regarding receipt of a given exposure prior to the onset of the illness. This was the approach that was used, for example, several decades ago in evaluating the possible impact of aspirin intake on the development of Reyes

syndrome (a serious childhood illness). Children diagnosed with this condition and those without it were compared regarding the ingestion of aspirin-containing products in the days leading up to the onset of the cases' disease. Because a far larger proportion of cases than "controls" had taken aspirin during this period of time, an inference could be made that aspirin consumption could give rise to Reyes syndrome in some children. The validity of that inference has been supported by the sharp reduction in the occurrence of Reyes syndrome in the US following a sharp reduction in the use of aspirin by American children.

It is clear from the CDC report on liver failure in Hawaii that the study they performed was NOT of this type. In the report, the study is characterized as but an "investigation to describe case patients". Cases were defined as not only having sustained acute hepatitis and liver failure, but as having previously consumed a weight loss or muscle building dietary supplement. As a result, it was not possible to contrast cases and controls regarding a history of use of such supplements, and thus it was not possible for this investigation to examine the potential role of a supplement (whether OxyELITE Pro or any other) as a factor in the development of acute hepatitis and liver failure.

The Executive Summary of the CDC report concludes that the "etiology of this cluster [of cases of hepatitis and liver failure] has not yet been identified". I concur with this assessment: unfortunately, the investigation presented in the report did not have the potential to elucidate etiologic factors.